

# Analyzing Relationships Among Features of Diabetes-Induced Cerebral Microvascular Disease Using Causal Inference Methods

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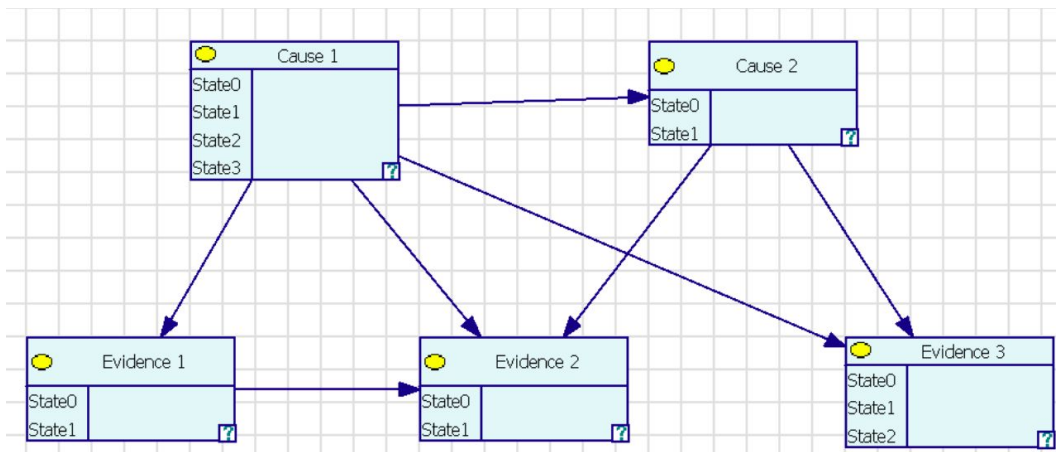
# Diabetes and CVD: The Issue

- Type 2 diabetes mellitus (T2DM) affects 462 million people worldwide [1].
- T2DM can cause cerebral microvascular disease (CVD), affecting the brain.
- Exact relationship among features of CVD remains unclear.
  - If more was known, treatment of patients could improve.
- Machine learning (ML) in this issue is limited.
  - ML: the use of algorithms to find relationships among data



# Machine Learning Causal Inference in this Area

- Machine learning causal inference methods - find cause-and-effect relationships among data
- Bayesian networks - causal inference
- Previously used in predicting diabetes and stroke
- Granger causality-inspired method



[3]

# Research Questions and Real World Applications

- How are severity of T2DM, gender, inflammation biomarkers, and cerebral vasoreactivity in the brain related in the context of CVD?
  - How can machine learning algorithms be applied to this issue to further explore and define the relationship between these factors?
- How can further knowledge of the relationships between the features of CVD aid patients of related diseases, such as T2DM, stroke, Alzheimer's, and dementia?

# Data Acquisition, Subsetting, and Cleaning

Distribution of Data Points in Each Subset

Subset	Male	Female	Control	T2DM	All
GE 79-1	23	49	29	43	72
GE 71, 75, 79-1	101	108	42	147	209
GE 75, 79-1	72	86	42	116	158

Data acquisition [4]

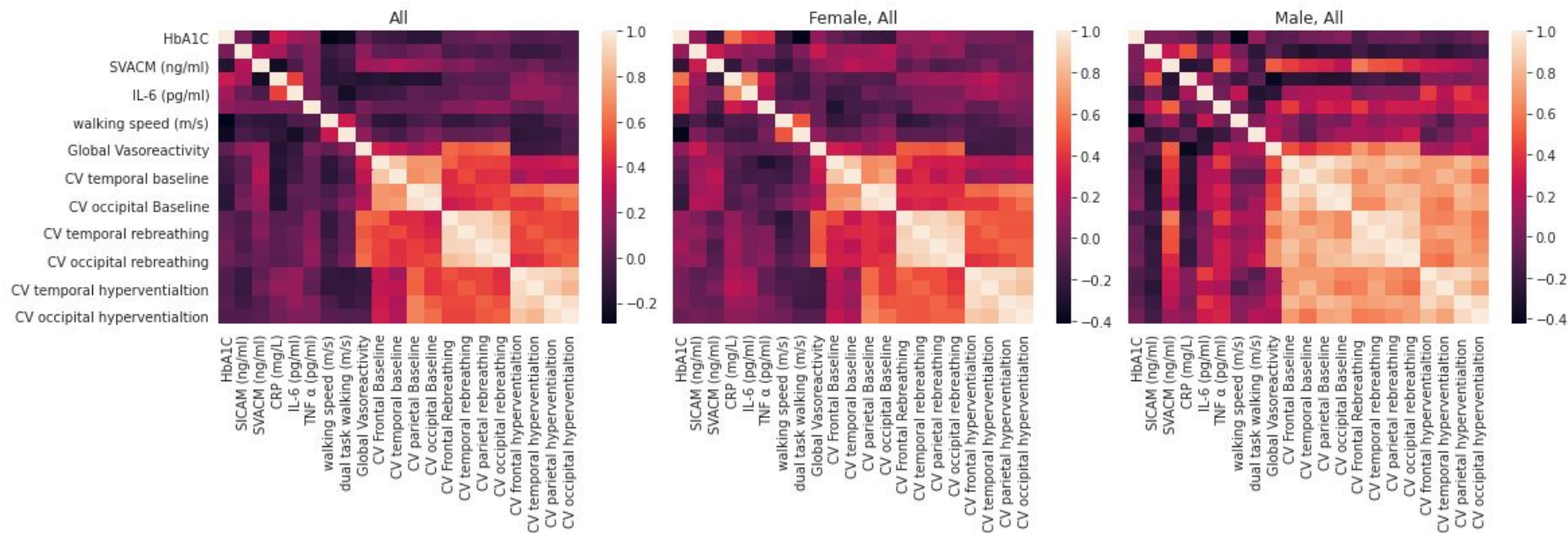
# Linear Regression, Pearson's r, Correlation Heatmaps

- Linear regression and Pearson's r found from pairs of features.
- Correlation heatmaps visualized using data from GE 79-1.
  - Split based on group and gender.

## Distribution of Data Points in GE 79-1

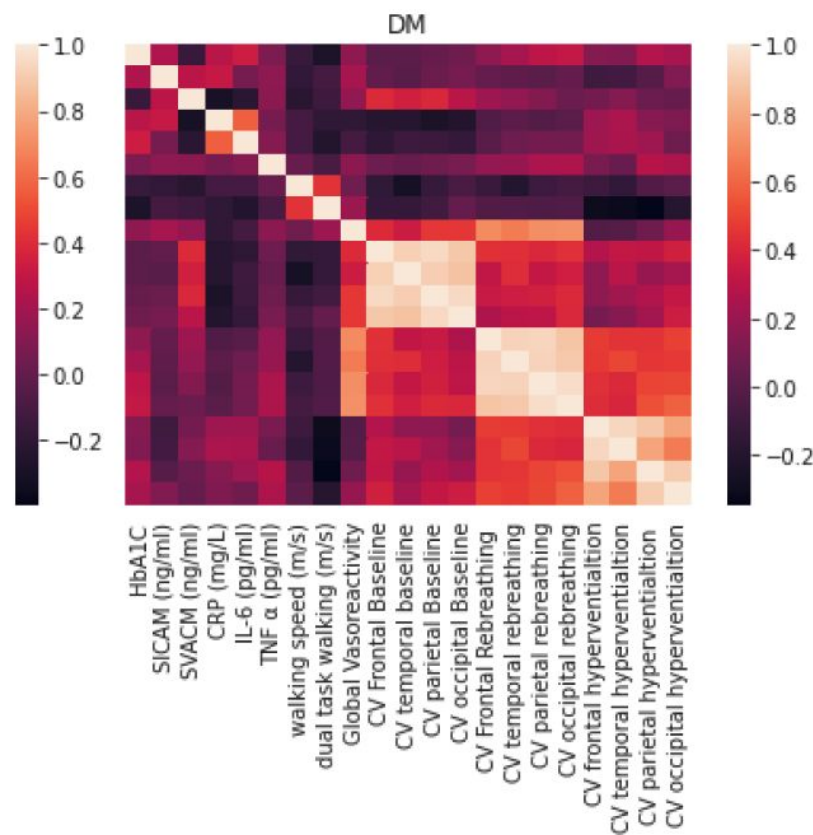
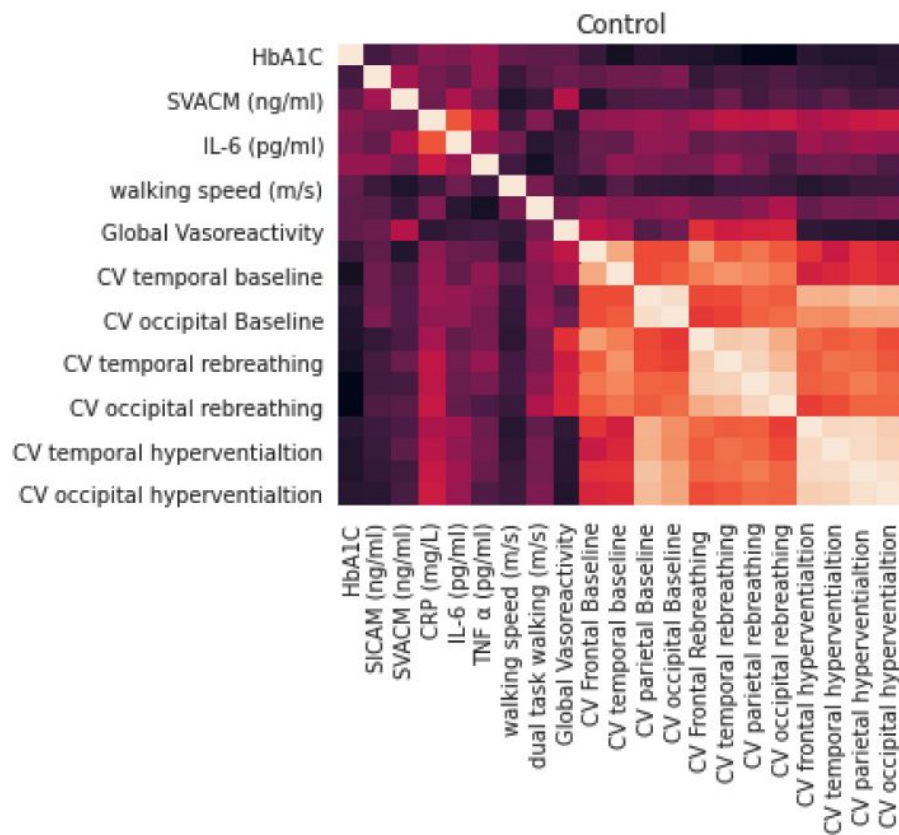
	Male	Female	All
Control	8	21	29
T2DM	15	28	42
All	23	49	72

# Correlation Heatmaps (All, Female, and Male)

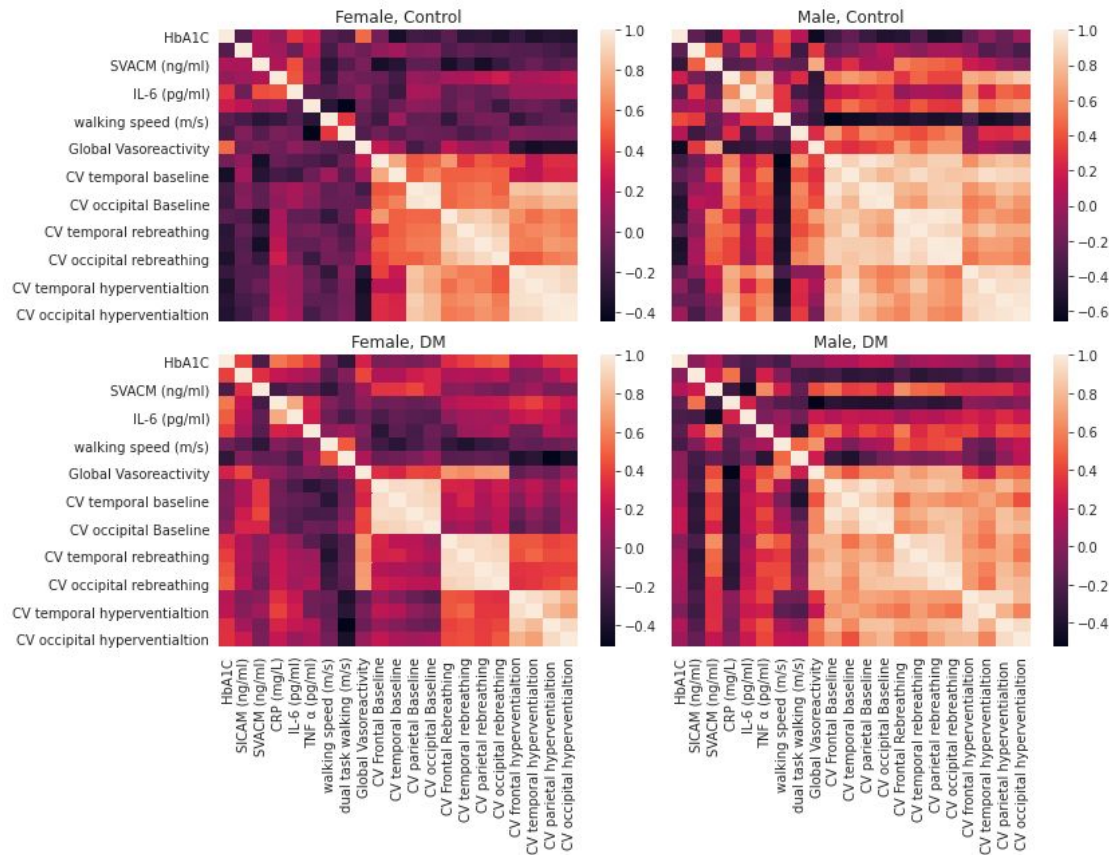




# Correlation Heatmaps (Control and DM)



# Correlation Heatmaps (Gender and Group)



Why are there differences?

- Stroke has different effects in males and females [6]
- Sex-specific inflammatory signalling [5]
- SVCAM and ischemic stroke [6]

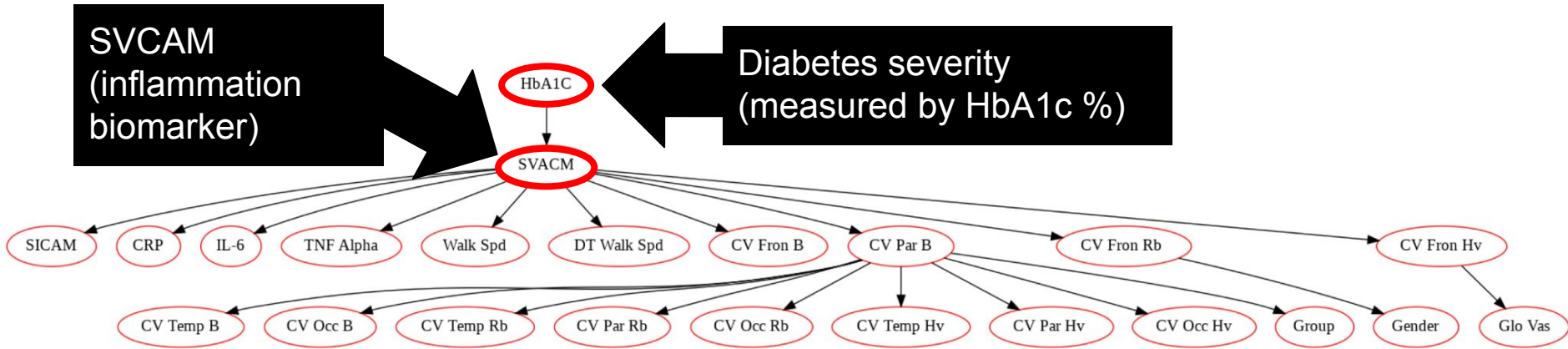
# Bayesian Networks and Data Subsets

- Bayesian networks
  - The Chow-Liu algorithm was implemented on the following subsets of the data.

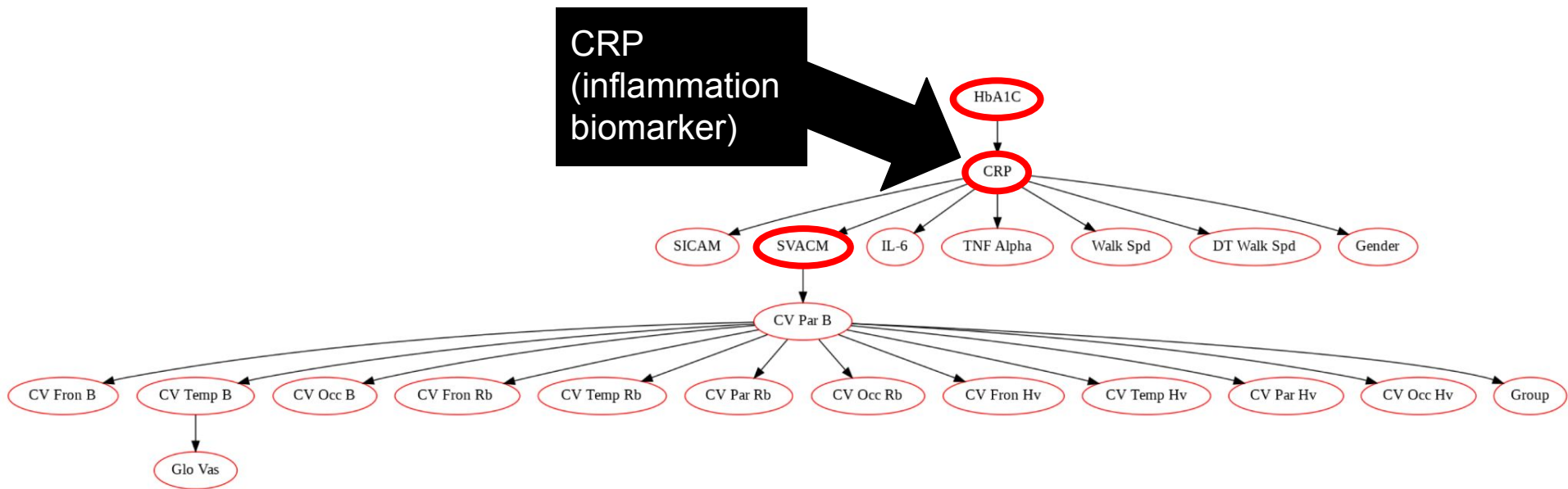
Features in Each Subset of the Data

Subset	Features
GE 79-1	Group, Gender, Severity, Inflammation Biomarkers, Global Vasoreactivity, Walking and Dual Walking Speeds, Cerebral Vasoreactivities
GE 71, 75, 79-1	Group, Gender, Severity, Walking Speed
GE 71, 75, 79-1	Group, Gender, Severity, Walking Speed, Cerebral Vasoreactivities
GE 75, 79-1	Group, Gender, Severity, Walking Speed, Global Vasoreactivity
GE 75, 79-1	Group, Gender, Severity, Inflammation Biomarkers, Walking Speed, Global Vasoreactivity

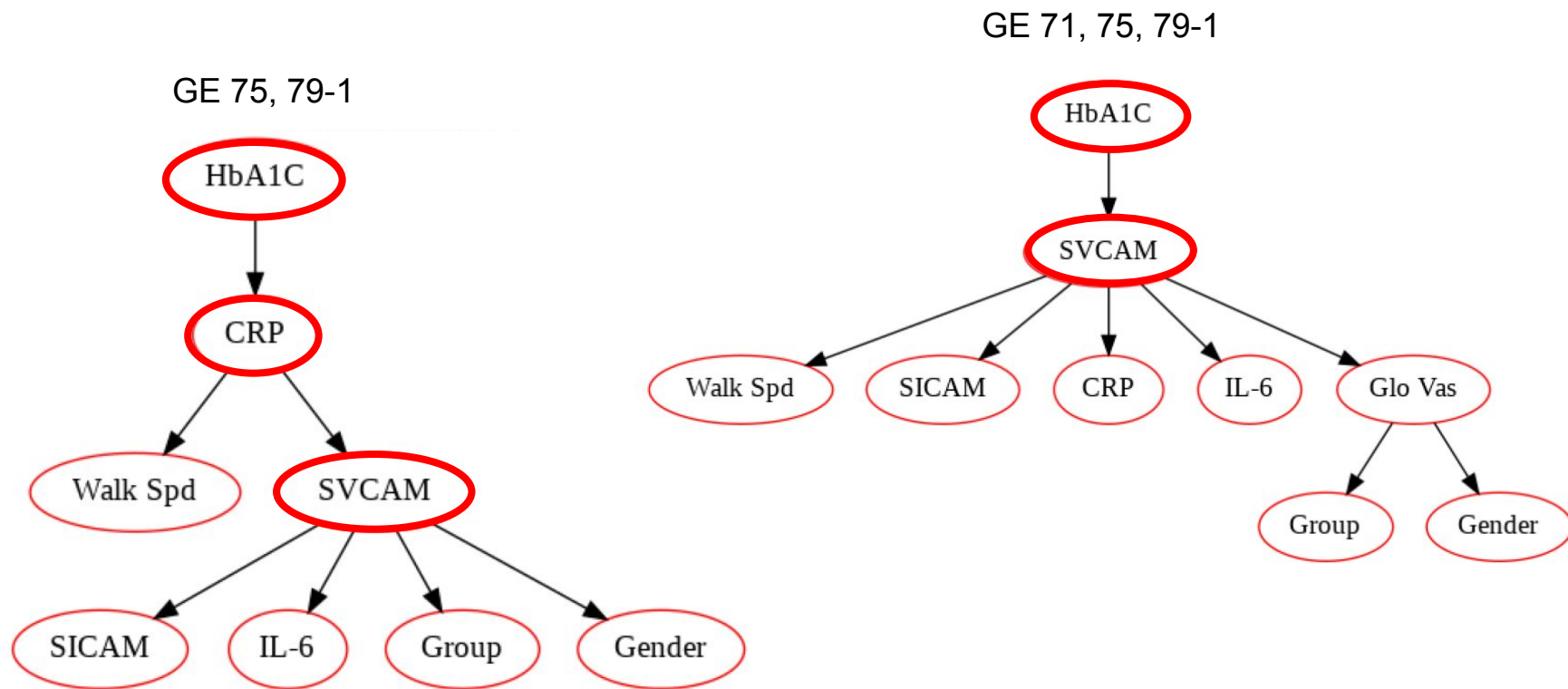
# Bayesian Networks on Subset of Data (GE 79-1)



# Bayesian Networks on Diabetes Group (GE 79-1)



# Bayesian Networks on Subsets of Data



# Granger Causality-Inspired Method

- Borrowing logic from Granger causality
  - In time series data, if A “Granger-causes” B, then A can be used to predict B
- Similarly:
  - We have three factors (A, B, and C) and we want to see if C “causes” A
  - Fit a regression model to see how well B can be used to predict A
  - Then, see how well B and C can be used to predict A
  - Calculate mean squared error (MSE) of each
  - Calculate ratio of AB MSE to ABC MSE
  - If ratio is significantly greater than 1, C likely has a factor in predicting A
- Linear regression and SVMs were used

# Granger-Inspired Method

Linear regression:

- A: IL-6, B: CRP
- C: Severity, SVCAM, Walking Speed

SVM:

- A: Severity, B: SVCAM
- C: CRP, IL-6, Walking Speed

Results of the Granger-Inspired Method

Model	A, B, C	AB Test	ABC Test	AB/ABC MSE Ratio
Linear	A: IL-6 B: CRP C: HbA1c %	0.7248	0.3920	1.8490
Linear	A: IL-6 B: CRP C: SVCAM	0.7248	0.4756	1.5240
Linear	A: IL-6 B: CRP C: Walking Spd	0.7248	0.4780	1.5163
SVM	A: HbA1c % B: SVCAM C: CRP	2.4998	1.7742	1.4089
SVM	A: HbA1c % B: SVCAM C: IL-6	2.4498	1.7746	1.4086
SVM	A: HbA1c % B: SVCAM C: Walking Spd	2.4998	1.7752	1.4082



# Granger-Inspired Method

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# Main Findings

- Main findings:
  - HbA1C %, SVCAM, CRP, IL-6, and walking speed seem to be the most important features among the ones we examined.
  - Differences between genders for cerebral vasoreactivities.
    - Partly explained by sex-specific inflammation biomarkers in ischemic stroke.
- Applications include:
  - Testing for HbA1C %, SVCAM, CRP, and IL-6 levels aid in finding early signs of diseases related to CVD [7].
  - Diabetes patients tested to find early signs of cognitive decline.

# Future Directions

- Include different features of CVD
- Determine strength of relationship between HbA1C %, SVCAM, CRP, IL-6, and walking speed
- Work with more data
- Apply different Bayesian network algorithms and causal inference methods
- Studies in adjacent fields, such as in CVD-related stroke and CVD-related cognitive decline.

# References

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- [3] Horný, M. (2014). Bayesian networks. *Boston University School of Public Health*, 17.
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- [6] Szychala MS, Honarpisheh P, McCullough LD. Sex differences in neuroinflammation and neuroprotection in ischemic stroke. *J Neurosci Res*. 2017 Jan 2;95(1-2):462-471. doi: 10.1002/jnr.23962. PMID: 27870410; PMCID: PMC5217708.
- [7] Landry, A., Docherty, P., Ouellette, S., & Cartier, L. J. (2017). Causes and outcomes of markedly elevated C-reactive protein levels. *Canadian family physician Medecin de famille canadien*, 63(6), e316–e323.